

Docket No.: M4065.0103/P103-A
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Howard E. Rhodes

Application No.: 10/642,612

Confirmation No.: 2827

Filed: August 19, 2003

Art Unit: 2812

For: BURIED CHANNEL CMOS IMAGER
AND METHOD OF FORMING SAME

Examiner: S. Mulpuri

AMENDMENT AFTER FINAL ACTION (37 C.F.R. SECTION 1.116)

MS AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

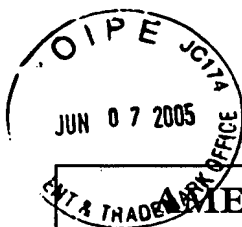
Dear Sir:

INTRODUCTORY COMMENTS


In response to the Office Action dated April 7, 2005 (Paper No. Mail Date 220050331), finally rejecting claims 124-130, please amend the above-identified U.S. patent application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks begin on page 7 of this paper.



AR / JTM

AMENDMENT TRANSMITTAL LETTER			Docket No. M4065.0103/P103-A	
Application No. 10/642,612-Conf. #2827		Filing Date August 19, 2003	Examiner S. Mulpuri	Art Unit 2812
Applicant(s): Howard E. Rhodes				
Invention: BURIED CHANNNEL CMOS IMAGER AND METHOD OF FORMING SAME				
TO THE COMMISSIONER FOR PATENTS				
Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate
Total Claims	22	- 29 =		x
Independent Claims	2	- 3 =		x
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
Other fee (please specify):				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:				0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity				
<input checked="" type="checkbox"/> No additional fee is required for this amendment.				
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.				
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.				
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.				
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>04-1073</u> as described below. A duplicate copy of this sheet is enclosed.				
<input checked="" type="checkbox"/> Credit any overpayment.				
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.				
 Thomas J. D'Amico Attorney Reg. No.: 28,371			Dated: <u>June 7, 2005</u>	
DICKSTEIN SHAPIRO MORIN & OSHINSKY LLP 2101 L Street NW Washington, DC 20037-1526 (202) 828-2232				